

Amendments to House Bill No. 545
1st Reading Copy

Requested by Representative Albert Olszewski

For the House Human Services Committee

Prepared by Sue O'Connell
February 23, 2015 (10:48am)

1. Title, page 1, line 5.

Strike: "PEER"

Insert: "PROFESSIONAL"

2. Title, page 1, line 6.

Strike: "PEER"

Insert: "PROFESSIONAL"

3. Title, page 1, line 7.

Strike: "SECTION"

Insert: "SECTIONS"

Following: "50-16-201,"

Insert: "50-16-202, AND 50-16-204,"

4. Page 1, line 15.

Strike: "peer"

Insert: "professional"

5. Page 2, line 4.

Strike: "peer"

Insert: "professional"

6. Page 2, line 12.

Strike: "Peer"

Insert: "Professional"

7. Page 2, line 16.

Strike: "peer"

Insert: "professional"

8. Page 2, line 17.

Strike: "peer"

Insert: "professional"

Strike: "physician" through "subspeciality"

Insert: "medical practitioner"

9. Page 2, line 18 through line 19.

Strike: "physicians" on line 18 through "medical specialties" on line 19

Insert: "medical practitioners who are licensed in the same profession"

10. Page 2.

Following: line 21

Insert: "Section 2. Section 50-16-202, MCA, is amended to read:

"50-16-202. **Committees to have access to information.** It is in the interest of public health and patient medical care that health care facility committees have access to the records and other health care information relating to the condition and treatment of patients in the health care facility to study and evaluate for the purpose of evaluating matters relating to the care and treatment of patients for research purposes and for the purpose of reducing morbidity or mortality and obtaining statistics and information relating to the prevention and treatment of diseases, illnesses, and injuries. To carry out these purposes, any health care facility and its agents and employees may provide medical records or other health care information relating to the condition and treatment of any patient in the health care facility to any utilization review, peer professional review, medical ethics review, quality assurance, or quality improvement committee of the health care facility."

{ Internal References to 50-16-202:

37-2-404x 37-2-404x 50-16-203 }"

Insert: "Section 3. Section 50-16-204, MCA, is amended to read:

"50-16-204. **Restrictions on use or publication of information.** A utilization review, peer professional review, medical ethics review, quality assurance, or quality improvement committee of a health care facility may use or publish health care information only for the purpose of evaluating matters of medical care, therapy, and treatment for research and statistical purposes. Neither a committee nor the members, agents, or employees of a committee shall disclose the name or identity of any patient whose records have been studied in any report or publication of findings and conclusions of a committee, but a committee and its members, agents, or employees shall protect the identity of any patient whose condition or treatment has been studied and may not disclose or reveal the name of any health care facility patient."

{ Internal References to 50-16-204: None. }

- END -

HOUSE BILL NO. 545

INTRODUCED BY A. OLSZEWSKI

A BILL FOR AN ACT ENTITLED: "AN ACT REVISING LAWS RELATING TO HEALTH CARE PROFESSIONAL
REVIEW COMMITTEES; PROVIDING A DEFINITION OF A ~~PEER~~ ^{PROFESSIONAL} REVIEW COMMITTEE; PROVIDING THAT
CERTAIN PHYSICIANS MAY BE INCLUDED AS MEMBERS OF A ~~PEER~~ ^{PROFESSIONAL} REVIEW COMMITTEE; AND
AMENDING SECTION 50-16-201, MCA." ^{SECTIONS 50-16-202, 50-16-204,}

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

Section 1. Section 50-16-201, MCA, is amended to read:**"50-16-201. Definitions.** As used in this part, the following definitions apply:

(1) "Critical access hospital" has the meaning provided in 50-5-101.

(1)(2) (a) "Data" means written reports, notes, or records or oral reports or proceedings created by or
at the request of a utilization review, ~~peer~~ ^{professional} review, medical ethics review, quality assurance, or quality
improvement committee of a health care facility that may be shared with a medical practitioner, including the
medical practitioner being reviewed, and that are used exclusively in connection with quality assessment or
improvement activities, including the professional training, supervision, or discipline of a medical practitioner by
a health care facility. The term includes all subsequent evaluations and analysis of an untoward event, including
any opinions or conclusions of a reviewer.

(b) The term does not include:

(i) incident reports or occurrence reports; or

(ii) health care information that is used in whole or in part to make decisions about an individual who is
the subject of the health care information.

(2)(3) "Health care facility" has the meaning provided in 50-5-101.

(4) "Hospital" has the meaning provided in 50-5-101.

(3)(5) (a) "Incident report" or "occurrence report" means a written business record of a health care facility
that:

(i) may be but is not required to be created by the staff involved in response to an untoward event, such
as a patient injury, adverse outcome, or interventional error, for the purpose of ensuring a prompt evaluation of

1 the event; and

2 (ii) is a factual rendition of the event.

3 (b) The terms do not include any subsequent evaluation of the event created by or at the request of a
4 utilization review, ^{professional} peer review, medical ethics review, quality assurance, or quality improvement committee,
5 regardless of whether or not the subsequent evaluation of the event occurred in response to an incident report
6 or occurrence report. The creation of an incident report or occurrence report is not a condition precedent for a
7 subsequent evaluation of an event, and any subsequent evaluation of an event remains privileged and
8 confidential pursuant to this part, regardless of the creation of an incident report or occurrence report.

9 (4)(6) "Medical practitioner" means an individual licensed by the state of Montana to engage in the
10 practice of medicine, osteopathy, podiatry, optometry, or a nursing specialty described in 37-8-202 or licensed
11 as a physician assistant pursuant to 37-20-203.

12 (7) ^{Professional} "Peer review committee" means a committee of a health care facility, the governing board or a
13 committee of the governing board of a health care facility, or a committee of the medical staff of a health care
14 facility that operates under written bylaws approved by the governing board of the health care facility and is
15 authorized to conduct professional review activity, including the evaluation of the quality of medical and health
16 care services or the competence of medical practitioners. A ^{Professional} peer review committee of a hospital or critical access
17 hospital formed for the purpose of ^{Professional} peer review activity relating to a ^{medical practitioner} physician practicing in a medical subspecialty
18 may include in its membership, without limitation, ^{medical practitioners who are licensed in the same profession} physicians who are certified in the same medical subspecialty
19 by a member board of the American board of medical specialties and who practice at another hospital or critical
20 access hospital licensed by the department of public health and human services.

21 (8) "Physician" has the meaning provided in 37-3-102."

22 - END -